

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JW	114.00	
O.I.P.E. CLASSIFIER	RSD	2/16/23	
FORMALITY REVIEW	W/15		
RESPONSE FORMALITY REVIEW		00/00	

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date				
Final	Original	08	12	5	11
1	1	✓	✓	✓	✓
2	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓
7	✓	✓	✓	✓	✓
8	✓	✓	✓	✓	✓
9	✓	✓	✓	✓	✓
10	✓	✓	✓	✓	✓
11	✓	✓	✓	✓	✓
12	✓	✓	✓	✓	✓
13	✓	✓	✓	✓	✓
14	✓	✓	✓	✓	✓
15	✓	✓	✓	✓	✓
16	✓	✓	✓	✓	✓
17	✓	✓	✓	✓	✓
18	✓	✓	✓	✓	✓
19	✓	✓	✓	✓	✓
20	✓	✓	✓	✓	✓
21	✓	✓	✓	✓	✓
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23	✓	✓	✓	✓	✓
24	✓	✓	✓	✓	✓
25	✓	✓	✓	✓	✓
26	✓	✓	✓	✓	✓
27	✓	✓	✓	✓	✓
28	✓	✓	✓	✓	✓
29	✓	✓	✓	✓	✓
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If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

Claim	Date				
Final	Original	0	1	2	3
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